APPLICATION FOR MARRIAGE LICENSE						
CONTRACTING PARTIES						
Groom's Full Name						
Date of birth:	SSN:		Phone:			
Current address:						
City:	State:		ZIP Code:			
County:	Birth Place:		Race:			
EMPLOYMENT INFORMATION						
Current employer:						
	GROOM'S FATHE	R'S INFORMATION				
Father's Full Name						
Address:			Phone:			
City:	State:		ZIP Code:			
Birth Place(City & State):						
GROOM'S MOTHER'S INFORMATION						
Mother's Full Name:			Maiden Name:			
Address:			Phone:			
City:	State:		Zip Code:			
Birth Place (City & State):	•					
BRIDE'S INFORMATION						
Bride's Full Name			Maiden Name:			
Date of birth:	SSN		Phone			
Current address:						
City:	State:		Zip:			
County:	Birthplace:		Race:			
Designated Surname:						
EMPLOYMENT INFORMATION						
Current employer:						
BRIDE'S FATHER'S INFORMATION						
Father's Full Name						
Address:	ess:					
City:	State:		ZIP Code:			
Birth Place(City & State):						
BRIDE'S MOTHER'S INFORMATION						
Mother's Full Name: Maiden Name:						
Address: Phone:		Phone:				
City:	State:		Zip Code:			
Birth Place (City & State):						

PREVIOUS MARRIAGE INFORMATION						
Number of Previous Marriages:						
If Previously Married How was it Dissolved/Upon What Grounds?						
When & Where?	Any Legal Impediment?	☐ Yes	□ No			

Bring a copy of your **Picture ID** or **Birth Certificate**.

If you have been married before, bring a copy of your divorce decree. **Payment** \$76.00 W/O 6 hours counseling \$36.00 W 6 hours counseling

Counseling forms are provided at Probate Court's office.